

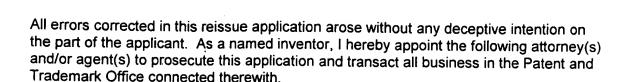
Docket No. 901.0013USU

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name. I believe I am an original, first and joint inventor of the subject matter which is described and claimed in patent number <u>5,811,808</u>, granted <u>September 22, 1998</u>, and for which a reissue patent is sought on the invention entitled

## INFRARED IMAGING SYSTEM EMPLOYING ON-FOCAL PLANE NONUNIFORMITY CORRECTION

The s	pecification of which is attached hereto
	is attached hereto.
XXX	was filed on <u>September 21, 2000</u> as reissue application number 09/667,826 and was amended on
l have includi	reviewed and understand the contents of the above-identified specification, ng the claims, as amended by any amendment referred to above.
l ackno	owledge the duty to disclose information which is material to patentability as d in 37 CFR 1.56.
l verily reasor	believe the original patent to be wholly or partly inoperative or invalid, for the as described below. (Check all that apply).
	by reason of a defective specification or drawing.
<u>XXX</u>	by reason of the patentee claiming more or less than he had the right to claim in the patent.
	by reason of other errors.
At leas	t one error upon which reissue is based is described as follows:
Indepe require	indent claims 1, 26 and 35 included language, i.e., "parallel connected" that is not do for patentability.
Indepe patenta	ndent claim 27 included language, i.e., "capacitors,' that is not required for ability.



NAMES	REGISTRATION NUMBERS
Harry F. Smith	32.493
Paul D. Greeley	31,019
Charles N.J. Ruggiero	28,468

SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO:
Harry F. Smith, Esq. Ohlandt, Greeley, Ruggiero & Perle, L.L.P. One Landmark Square, 10 <sup>th</sup> Floor Stamford, Connecticut 06901-2682	Harry F. Smith, Esq. Telephone: (203) 327-4500 Telefax: (203) 327-6401

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF INVENTOR	LAST NAME CANNATA	FIRST NAME ROBERT	MIDDLE NAME F.
RESIDENCE & CITIZENSHIP	CITY SANTA BARBARA	STATE OR COUNTRY CA	CITIZENSHIP US
POST OFFICE ADDRESS	P.O. ADDRESS 1462 CAMINO RIO VERDE	CITY & STATE SANTA BARBARA, CA	ZIP CODE 93111

Inventor's signature		_ Date _	, 200	)(
	ROBERT F. CANNATA			

FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME
OF INVENTOR	METSCHULEIT	JEFFREY	L.
RESIDENCE & CITIZENSHIP	CITY	STATE OR COUNTRY KY	CITIZENSHIP US
POST OFFICE	P.O. ADDRESS	CITY & STATE	ZIP CODE
ADDRESS	4310 RUDY LAND	LOUISVILLE, KY	40207

Inventor's signature	Elfres I	Michalit	Date Jahuary	<u> </u>
	JEFFREY L. MI	ETSCHULEIT		

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name. I believe I am an original, first and joint inventor of the subject matter which is described and claimed in patent number <u>5,811,808</u>, granted <u>September 22, 1998</u>, and for which a reissue patent is sought on the invention entitled

## INFRARED IMAGING SYSTEM EMPLOYING ON-FOCAL PLANE NONUNIFORMITY CORRECTION

The sp	pecification of which
	is attached hereto.
XXX	was filed on <u>September 21, 2000</u> as reissue application number 09/667,826 and was amended on
	reviewed and understand the contents of the above-identified specification, ng the claims, as amended by any amendment referred to above.
	owledge the duty to disclose information which is material to patentability as d in 37 CFR 1.56.
	believe the original patent to be wholly or partly inoperative or invalid, for the as described below. (Check all that apply).
	by reason of a defective specification or drawing.
XXX	by reason of the patentee claiming more or less than he had the right to claim in the patent.
	by reason of other errors.
At leas	st one error upon which reissue is based is described as follows:
	endent claims 1, 26 and 35 included language, i.e., "parallel connected" that is not ed for patentability.
Indepe patent	endent claim 27 included language, i.e., "capacitors,' that is not required for ability.

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

NAMES	REGISTRATION NUMBERS
Harry F. Smith	32,493
Paul D. Greeley	31,019
Charles N.J. Ruggiero	28,468

SEND CORRESPONDENCE TO:	DIRECT TELEPHONE
	CALLS TO:
Harry F. Smith, Esq.	
Ohlandt, Greeley, Ruggiero & Perle, L.L.P.	Harry F. Smith, Esq.
One Landmark Square, 10 <sup>th</sup> Floor	Telephone: (203) 327-4500
Stamford, Connecticut 06901-2682	Telefax: (203) 327-6401

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF INVENTOR	LAST NAME CANNATA	FIRST NAME ROBERT	MIDDLE NAME F.
RESIDENCE & CITIZENSHIP	CITY SANTA BARBARA	STATE OR COUNTRY CA	CITIZENSHIP US
POST OFFICE ADDRESS	P.O. ADDRESS 1462 CAMINO RIO VERDE	CITY & STATE SANTA BARBARA, CA	ZIP CODE 93111

Inventor's signature ROBERT F. CANNATA Date 12/22/00, 2000

FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME
OF INVENTOR	METSCHULEIT	JEFFREY	L.
RESIDENCE & CITIZENSHIP	CITY FISHERVILLE	STATE OR COUNTRY KY	CITIZENSHIP US
POST OFFICE	P.O. ADDRESS 2200 WILDFLOWER TRAIL	CITY & STATE	ZIP CODE
ADDRESS		FISHERVILLE, KY	40023

Inventor's signature			Date	, 2	, 2000
•	IFFFREY I	METSCHIII EIT			